

General Description of Changes to Module 6

1. Changes to question numbers
2. Expanded expectations

PrimusGFS v3.2 Summary of Changes				
Q #	**New #**	**v3.2 Question**	**v3.2 Expectation**	**v3.2 Interpretation Guideline**
6.01.01		Is there a team responsible for the HACCP program at the operation, with an assigned leader for the development, implementation and on-going maintenance of the HACCP system?	There should be a documented list of the team carrying out the HACCP program in the operation, with one leader or coordinator assigned as responsible. The team should be multidisciplinary and include people from management, production, quality, sanitation, maintenance, shipping, procurement, sales, external consultants, etc. The size of the team will depend on the size of the operation and the processes performed.	Total compliance (10 points): There should be a formally identified group of people in charge of development and maintenance of the Hazard Analysis Critical Control Point (HACCP) program along with their corresponding responsibilities. The group should be comprised of individuals from different areas of the company such as top management, quality management, production, maintenance, sanitation, QC, etc. Consider including resources from outside e.g. suppliers, buyers, consultants, trade association, universities, extension office, etc. One member of the team should be designated the HACCP Coordinator (leader). Where a consultant has been designated the HACCP coordinator, it should be evident that they are present at all meetings and actively involved in the program. The HACCP team should meet at least quarterly (ideally monthly). If the company is too small (less than 20 people) to have a HACCP team, there should still be one individual designated as the HACCP coordinator. That individual is responsible for the implementation of the HACCP program along with any changes and updates to the HACCP program. Minor deficiency (7 points) if: • Team has been put together but lacks key representation e.g. maintenance, sanitation. • Only three meetings have occurred in the last 12 months (for an all year-round operation) Major deficiency (3 points) if: • The team or individual is assigned but does not meet regularly to review the HACCP program. • A large company, but only a single individual has been designated to develop the operational HACCP plan. • Two or less meetings have occurred in the last 12 months (for an all year-round operation). Non-compliance (0 points) if: • The HACCP team or the individual assigned to manage the HACCP program has not kept the program updated. • There is no HACCP team or designated HACCP Coordinator.

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6.01.02		No change in v3.2	The HACCP Coordinator should have a certificate of a formal HACCP training from a recognized organization, institution or trainer with a minimum duration of 2 days or 16 hours, taken within the last 5 years. The rest of the team should have at least an internal training (within the last 5 years) to make sure they are knowledgeable of the HACCP principles. These trainings should be documented.	Total compliance (15 points): The HACCP Coordinator should have a certificate of formal HACCP training from a recognized organization, institution or trainer i.e. certification from a HACCP training course accredited by the International HACCP Alliance or equivalent (e.g. university provided courses) providing formal training, taken within the last 5 years. Preventive Control Qualified Individual (PCQI) training can also be accepted, as long as it is equivalent to the International HACCP Alliance training (covers the 7 Codex Alimentarius HACCP principles and the 12 HACCP implementation steps). HACCP team members should have thorough HACCP training (in-house or external within the last 5 years) given by someone who has HACCP experience and has attended an accredited International HACCP Alliance course (or equivalent). Records of training should be kept and certificates, where relevant. http://www.haccpalliance.org/sub/index.html Minor deficiency (10 points) if: • Not all HACCP team members are trained in HACCP (but majority of HACCP team members have been trained). • Management team members have not received HACCP training. • Single/isolated instance(s) of omissions or incorrect data in the records. Major deficiency (5 points) if: • HACCP Coordinator has not completed a formal certified HACCP training course within the last 5 years. • Numerous instances of omissions or incorrect data in the records. Non-compliance (0 points) if: • No training records for HACCP team members.

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6.01.03		No change in v3.2	The description should detail the products' name and composition (ingredients), packaging used, shelf-life, storage conditions, distribution requirements, important food safety characteristics (if any) (e.g., pH, water activity), label instructions, the intended use, statement on whether the product is RTE and who the intended consumer is.	Total compliance (10 points): Product description(s) should clearly describe the product and its distribution and be used to determine if specific controls are important throughout the distribution chain. The description should indicate the product(s) name, composition (ingredients), type(s) of packaging, shelf-life and method of storage and distribution. Information should include intended use i.e. does it need washing, peeling, cooking prior to consumption, is it RTE, etc., by the consumer, and reflect the label of the product (unit packed product). Intended use should include any potential for abuse or misuse of the produce (e.g. eating raw when product is intended to be cooked). Product description(s) should list all ingredients including allergens, define and indicate details regarding whether the item is perishable or long life, if there are any special storage and distribution requirements and any important food safety characteristics that can influence the growth of pathogens (e.g., pH, water activity), and labeling requirements including allergen information and any other legal requirements. Product description(s) should define the potential risk associated with the product, materials used and also who the intended customers are (general public, restricted to certain sectors, e.g. people not suffering from a certain allergy, diabetic issues, other at-risk groups, etc.). The product description can be generic if the products and processes are similar. Where the products and/or processes are not similar to each other, specific product descriptions are required.

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6.01.04		No change in v3.2	The information (from receiving through to final storage and shipping) on the flow diagram is used to identify any and all steps throughout the process where there is a potential for a food safety hazard to be introduced or for a product safety control to be implemented. Groups of similar products going through the same process can be grouped in the same flow chart. The flow chart should indicate all raw materials, ingredients and materials used in all preparation steps, all equipment used, blending steps, processing steps, rework, by-product, returned products and products destined for further processing, packaging materials (carton and unit packaging) and packaging equipment. All inputs should be included, such as packaging, water source (e.g. city or well), ice, anti-microbials, fungicides, etc. Each step should show any holding times, temperature regimes, etc., at appropriate process steps. Diagram should show re-work processes and when product is diverted to be used for other purposes. Process flows can be augmented by written process descriptions (where helpful).	Total compliance (10 points). There should be process flow charts for each HACCP plan. The flow chart should show each step of the process(es) under control of the operation (from receiving through final storage and shipping), so that the hazard analysis can be completed properly. The flow chart is used to identify any and all steps throughout the process where there is a potential for a food safety hazard to be introduced or for a product safety control to be implemented. The flow chart should indicate all raw materials, ingredients and materials used in all preparation steps, all equipment used, blending steps, processing steps, rework, by-product, returned products and products destined for further processing, packaging materials (carton and unit packaging) and packaging equipment. All inputs should be included, such as packaging, water source (e.g. city or well), ice, anti-microbials, fungicides, etc. Each step should show any holding times, temperature regimes, etc., at appropriate process steps. For example, a step termed “packing” in an apple packinghouse is incorrect since it omits to detail many of the processes, e.g. dump tanks, selections, recirculated product wash/rinse steps, single-pass wash/rinse steps, waxers, fungicide, drying, packing the boxes and coding. In operations with multiple products but similar processes, a single process flow may be used. Where there are multiple products but with different processes then individual process flows are required. Diagram should show re-work processes and when product is diverted to be used for other purposes. Process flows can be augmented by written process descriptions (where helpful).
6.01.05		No change in v3.2	Flow diagrams should be verified on-site by the food safety team and the team should make any changes required to the flow diagram. Any significant changes to the process must be accurately reflected in the flow diagram and evaluated to determine if the changes have an impact on the hazards analysis and CCPs in place. The flow chart(s) is signed and dated by the HACCP coordinator to confirm it reflects the process at different moments in time (auditor should confirm how and when flow chart(s) were verified) and there are no missing steps.	Total compliance (10 points): The steps in the flow chart are used to organize the hazard analysis. Flow diagrams should be verified on-site by the food safety team and the team should make any changes required to the flow diagram. Any significant changes to the process must be accurately reflected in the flow diagram and evaluated to determine if the changes have an impact on the hazard analysis and CCPs in place. The flow chart(s) is signed and dated by the HACCP coordinator to confirm it reflects the process at different moments in time (auditor should confirm how and when flow chart(s) were verified) and there are no missing steps. Insufficient detail, missing steps, etc., will undermine the hazard analysis process (6.02.01). Any inaccuracies in the flow diagram should be scored in 6.01.04.

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6.02.01		No change in v3.2	Hazard analyses are required to identify each potential food safety hazard (biological, chemical and physical) at each step of the production process. The analyses should evaluate the likelihood of hazard occurrence and potential hazard severity. The hazard analysis document(s) should show the control measures. Each step identified in the process flow diagram should be assessed in the hazard analysis. The hazard analysis should be reviewed when changes occur affecting the product description and/or the process flow. **A ZERO POINT (NON-COMPLIANCE) DOWN SCORE IN THIS QUESTION RESULTS IN AUTOMATIC FAILURE OF THIS AUDIT.**	Total compliance (15 points): A hazard analysis identifies and evaluates potential food safety hazards and determines if control measures are in place to prevent, eliminate or reduce the food safety hazard to an acceptable level. There should be a detailed, documented hazard analysis for each process flow in order to prove that a proper hazard analysis was conducted. Note, if there are errors in the process flow, it is likely there will also be errors in the hazard analysis. At each step of the process, from raw material receipt and storage, through processing and packing, storage and distribution the hazard analysis should look at the severity and likelihood of all potential (known or reasonably foreseeable) food safety hazards that may be reasonably expected to occur in terms of specific biological, chemical (including radiological), physical, as well as the control measures for each. Operations following US FDA FSMA requirements should also consider economically motivated hazards and preventive controls, such as process, allergens, sanitization, and supply chain controls for the identified hazards. Any potentially RTE products must include an evaluation of specific environmental pathogens related to ingredients/products. Research previous outbreaks and issues associated with the ingredients/products to help identify specific risks with ingredients/products used. Examples of specific biological hazards (bacteria, viruses, parasites and pathogens) include Listeria monocytogenes, Salmonella spp., Enterohaemorrhagic *E. coli* (EHEC), Shiga toxin-producing *E. coli* (STEC), Cryptosporidium parvum, Cyclospora cayetanensis; chemical hazards include mycotoxins, pesticide residues, sanitation chemicals, lubricants, allergens, natural toxins, unapproved additives; physical hazards include extraneous matter that may cause choking or other injury e.g. stones, metal, glass, and brittle plastic; radiological hazards include local environmental issues (e.g. refer to Water Management District reports); economically motivated hazards including product substitutions, fillers, etc. Evaluation should include all ingredients, equipment, processing steps (e.g., receiving, dump tanks, brush bed systems, recycled wash systems including hydro-vacuum coolers, ice injectors, flume washers, etc., single line wash systems, ice manufacturing), inputs including packaging materials and post-harvest treatments, sanitation and employee hygiene, etc. Each step identified in the process flow diagram should be assessed in the hazard analysis. Justifications should be documented when identifying significant and non-significant hazards. Consideration should be given to what control measures, if any exist, can be applied to each hazard. More than one control measure may be required to control a specific hazard(s) and more than one hazard may be controlled by a specified control measure. Consider pre-requisite programs (PRPs) in place which provide basic environmental and operating conditions necessary for the production of safe, wholesome food and support decisions in the hazard analysis (e.g. pest control programs, allergen control programs, sanitation programs, maintenance programs, microbial testing programs, supplier control program, worker hygiene training, waste management, storage and transportation, etc.). The hazard analysis should indicate if an adequate control step for this potential

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				indicate if an adequate control step for this potential risk exists further down the process. The hazard analysis should be reviewed when changes occur affecting the product description and/or the process flow. The hazard analysis for all products must be written, regardless of its outcome.
6.02.02		Have CCP decisions been made with logical, documented justification and where CCPs are implemented in a specific processing step, have they been developed to control the identified hazard(s)?	The CCPs should be created based on the documented hazard analyses, i.e. there should be a logical documented approach (such as utilizing a CCP decision tree) that justifies whether or not there is a step(s) in the process determined to be a CCP(s). CCP decisions should be properly justified with supporting documents, rationale and evidence. The CCPs identified in the hazard analysis should be developed in detail to define the parameters involved and the monitoring requirements needed in order to control the hazard.	Total compliance (15 points): CCP decisions should be properly justified with supporting documents, rationale and evidence. The CCPs identified in the hazard analysis should be developed to define, in detail, the parameters involved, and monitoring requirements to control the hazard(s). The CCPs should be created from the documented hazard analysis i.e. there should be a logical documented approach (such as utilizing a CCP decision tree that justifies whether or not there is a step(s) in the process determined to be a CCP(s). CCPs are steps that if not controlled will lead to a food safety issue and where there is no step further down the process that controls the risk. A CCP should be controllable and control is essential to prevent or eliminate a food safety hazard or reduce the risk to an acceptable “safe” level. It is possible to find that an auditee has carried out a proper hazard analysis and found no CCPs (see 6.02.04).
6.02.03	6.02.04	No change in v3.2	The identification of CCPs in the process will require the development of the criteria for managing it and the execution of the necessary activities in the production line. CCPs should be controllable and the controls should be able to eliminate or reduce the risk to acceptable “safe” levels. Where the operation determined that there are no CCPs (and the auditor is in agreement), no further HACCP development is required, and the rest of the module is not applicable.	No change in v3.2

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6.02.04	6.02.05	Have CCP critical control limits been established and are they supported by relevant validation documentation ?	No change in v3.2	Total confirmation (15 points): A critical control limit (CCL) represents the dividing line used to judge whether a CCP is under control or not. Each Critical Control Point should have one or more critical control limits for each identified hazard. Critical control limits (CCL's) i.e. the maximum and/or minimum parameters of what is being monitored e.g. with a metal detector, the sensitivity of the detector setting should be stated along with the size/type of test pieces used, or with an anti-microbial the minimum concentration required should be stated. Other CCLs may include temperature, time, pH, water activity, flow rates, line speed, dwell times, etc. More stringent "operating limits" may be useful during production to minimize failure to meet a critical limit. All CCPs should be supported by validation documentation showing that the critical control limits (CCL) are scientifically derived and meet any relevant legal requirements. Validation could take the form of publicly available legislative documents, industry best practice documents, peer reviewed research papers, on site validation studies, etc., or a mix of different validation sources. Where publicly available validation is not available, the auditee should have performed validation studies to support their stated critical control limits. For example, free chlorine limits for chlorinated recycled water systems could be stated in research papers and State documentation (e.g., Leafy Greens Marketing Agreement). Another example, metal detection limits could be supported by validation studies that show that smallest test probes possible were used and meet the FDA guidelines Minor deficiency (10 points) if: • Single/isolated instance(s) of omissions or incorrect CCL validation details. Major deficiency (5 points) if: • Numerous instances of omissions or incorrect CCL validation details. Non-compliance (0 points) if: • There is no documentation to support CCP critical control limits. • Validation documentation provided does not support the CCP control limits. • Widespread omissions or incorrect CCL validation details.
6.02.05	6.02.06	No change in v3.2	Monitoring requirements should detail the actions necessary (observations or measurements) to ensure whether a CCP is under control. Frequencies and requirements of monitoring should also be defined and documented for each CCP.	Total compliance (15 points): There should be determined and documented monitoring requirements and frequencies for the CCPs. Where monitoring is not continuous, the type and frequency of monitoring should be sufficient to ensure the CCP is under control. Frequency should be specified; "as needed" is not accepted as a stated frequency. Requirements should include the critical control limits (CCL's) i.e. the maximum and/or minimum parameters of what is being monitored e.g. with a metal detector, the sensitivity of the detector setting should be stated and size/type of test pieces used, or with an anti-microbial the minimum concentration required should be stated. Other CCLs may include temperature parameters, pH, flow rates, dwell time, etc. The requirements i.e. what is to be done should be specified on the HACCP plan.

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6.02.06	6.02.07	No change in v3.2	Specific responsibilities should be assigned for the monitoring, recording and corrective action implementation of each CCP to ensure compliance. The responsibility should be clearly indicated on the HACCP plan by at least naming the function e.g. QA Technician or trained designate, who is responsible for monitoring, recording and executing corrective action related to an individual CCP.	Total compliance (10 points): Specific responsibilities should be assigned for the monitoring, recording and corrective action implementation of each CCP to ensure compliance. If CCP records are not being completed properly, this may be an indication that the CCPs have not been assigned correctly. The responsibility should be clearly indicated on the HACCP plan by at least naming the function e.g. QA Technician or trained designate, who is responsible for monitoring, recording and executing corrective action related to an individual CCP. All records and documents associated with monitoring CCPs should be signed by the person(s) doing the monitoring, either physically or electronically.
6.02.07	6.02.08	No change in v3.2 **Point change 5 to 10**	Clear and simple standard operating procedures (SOPs) should be written for each monitoring process(es) of the CCPs. These SOPs should expand on what is written in the HACCP Plan and detail the monitoring activities in detail in the form of work instructions.	No change in v3.2
6.02.08	6.02.09	No change in v3.2	There should be a documented, detailed plan with written procedures to follow when there is a loss of control (deviation) of a CCP appropriate to the nature of the hazard. The corrective action details should note the critical control limit issue that occurred, what corrective actions were carried out, including what happened to potentially affected product and also how the process was “repaired” or “amended” in order to get the process back to the required control level. The HACCP plan corrective action sections should state where the corrective action details are to be recorded and details should match the written corrective action procedures. Where appropriate, preventative measures should also be required to reduce the likelihood the problem with recur.	Total compliance (15 points): Corrective actions are procedures that must be taken if critical controls are not properly implemented (e.g. there is a deviation from a critical limit) and unsafe product may have been produced. There should be a documented, detailed plan with written procedures to follow when there is a loss of control (deviation) of a CCP appropriate to the nature of the hazard. The procedures should include details regarding how to handle affected products (if necessary). The corrective action details should note the critical control limit issue that occurred, what corrective actions were carried out, including what happened to potentially affected product and also how the process was “repaired” or “amended” in order to get the process back to the required control level. The HACCP plan corrective action sections should state where the corrective action details are to be recorded and details should match the written corrective action procedures. Where appropriate, preventative measures should also be required to reduce the likelihood the problem will recur. This may include root cause analysis. Corrective actions should ensure that the CCP has been brought under control and require that a review is conducted in order to prevent a recurrence of the situation. Corrective actions may require review of the HACCP system (6.02.03) to determine if modifications are required. Corrective action records are scored under 6.03.06.

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6.02.09	6.02.10	Have recording forms been developed for monitoring the CCPs?	Recording form templates should be designed to record the monitoring of the CCPs that have been identified. The records should match the details as noted in the HACCP Plan and have CCPs identified by name and number, what is being measured, the frequency of the measurement, the critical control limit, the operating limit (if applicable), the responsible person(s) or team and the corrective action(s) required in the case of measurements not in compliance. These templates should be managed under the document control program.	Total compliance (15 points): Monitoring record templates should be designed to record the monitoring of the CCPs that have been identified. The records should match the details as noted in the HACCP Plan and have CCPs identified by name and number, what is being measured, the frequency of the measurement, the critical control limit, the operating limit (if applicable), the responsible person(s) or team and the corrective action(s) required in the case of measurements not in compliance. Recording forms should have a specific document and/or version code as part of the document control program (1.02.01). Minor deficiency (10 points) if: • Single/isolated instance(s) of a record(s) having been developed but does/do not match the details in the HACCP plan i.e. information or requirements on the recording template that does not match what is noted in the plan. • Single instance of recording forms lacking required details. Major deficiency (5 points) if: • Numerous instances of a record(s) having been developed but do not match the details in the HACCP plan i.e. information or requirements on the recording template that does not match what is noted in the plan. • More than one instance of recording forms lacking required details. Non-compliance (0 points) if: • Fundamental failure of record(s) that have been developed to match the details in the HACCP plan i.e. information or requirements on the recording template that does not match what is noted in the plan. • Single instance where a CCP has been created but a record for the monitoring data has not been developed.

Q #	New #	v3.2 Question	v3.2 Expectation	v3.2 Interpretation Guideline
6.02.10	6.02.11	No change in v3.2 **Point change 10 to 15**	Verification activities related to each CCP on the HACCP plan should be clearly detailed and documented. Verification activities verify that the HACCP plan is being implemented correctly, and may include microbial testing, customer complaints, equipment calibration, blade checks, visually observing a CCP operator, date checks of reagent expiration dates and any other information that CCPs might help generate. Verification activities also include a verification of the CCP monitoring records (6.03.05) by a HACCP trained supervisor or manager, checking that the CCP monitoring records have been completed in a proper and timely manner and including any corrective action work. Where verification activities have found that CCPs were not performing as required, there should be records that show that this prompted a review of the relevant part of the HACCP Plan.	Total compliance (15 points): Verification activities related to each CCP on the HACCP plan should be clearly detailed and documented. Verification activities verify that the HACCP plan is being implemented correctly, and might include microbial testing, customer complaints, equipment calibration, blade checks, visually observing a CCP operator, date checks of reagent expiration dates and any other information that CCPs might help generate. Verification activities also include a verification of the CCP monitoring records (6.03.05) by a HACCP trained supervisor or manager, checking that the CCP monitoring records have been completed in a proper and timely manner and including any corrective action work. Note, a CCP operator cannot verify their own work. Verification information might help improve and develop the HACCP program, but should show that the plan is being implemented correctly, is controlling the risk to an acceptable level (or eliminating the risk) and where this is not the case, this should be indicated on the verification paperwork along with corrective action details (e.g., reviewing a CCP, a process flow, a hazard analysis step, etc.). Where verification activities have found that CCPs were not performing as required, there should be records that show that this prompted a review of the relevant part of the HACCP Plan.

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6.02.11	6.02.03	Is the HACCP system reviewed when significant changes are made and at least once every 12 months?	The HACCP system should be reviewed by the HACCP team when significant changes are made e.g. raw materials, labelling requirements (including allergens), packaging, suppliers, product, process, construction, new equipment, recurring deviations, new scientific information, new legal requirements, new distribution or consumer practices, etc., including the hazard analyses, to ensure that the program is up to date and working properly. HACCP system review should occur at a frequency that ensures the HACCP Plan is being followed continuously and at least every 12 months. Where emerging issues, such as recalls, an outbreak, new research, etc., are relevant to the products and processes at hand, consideration of a HACCP review should occur. Documented re-training or educational sessions may be necessary. The review should include a written record which demonstrates each of the elements of the plan including the product descriptions, process flows, hazard analyses, CCP decisions, CCP recording, customer complaints, equipment calibration, record review, trend analysis data, etc., have been reviewed, verified as being accurate/appropriate and there should be a change record included in the plan to track changes over time. The HACCP team should inform workers involved of the review outcomes.	Total compliance (10 points). The HACCP system should be reviewed by the HACCP team when significant changes are made e.g. raw materials, labeling requirements (including allergens), packaging, suppliers, product, process, construction, new equipment, recurring deviations, new scientific information, new legal requirements, new distribution or consumer practices, etc., including the hazard analyses, to ensure that the program is up to date and working properly. HACCP system review should occur at a frequency that ensures the HACCP Plan is being followed continuously and at least every 12 months. Where emerging issues, such as recalls, an outbreak, new research, etc., are relevant to the products and processes at hand, consideration of a HACCP review should occur. Documented re-training or educational sessions may be necessary. The review should include a written record which demonstrates each of the elements of the plan including the product descriptions, process flows, hazard analyses, CCP decisions, CCP recording, customer complaints, equipment calibration, record review, trend analysis data, etc., have been reviewed, verified as being accurate/appropriate and there should be a change record included in the plan to track changes over time. The HACCP team should inform workers involved of the review outcomes. Minor deficiency (7 points) if: • Single/isolated instance(s) of omissions in the review. Major deficiency (3 points) if: • Numerous instances of omissions in the review. • No record of workers involved being informed of HACCP review outcomes. • Verification did not take place in the last 12 months but did take place in the last 18 months. Non-compliance (0 points) if: • There is no documented record of review.

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6.02.12	6.03.01	Is there documented evidence that all plant workers have attended a HACCP training, including specific training for CCP operators?	HACCP training is important in ensuring that all workers are knowledgeable regarding the basics of HACCP. This training is especially important for CCP operators, and for those workers, the training should cover the explanation of the procedures in which they are responsible and be included in the training management program (see 1.01.04). All training activities should be documented.	Total compliance (10 points): All plant workers (excludes office personnel) should receive basic HACCP overview training i.e. what is HACCP, the 7 principles, and what are the CCPs on site. Basic training might form part of the new hire orientation package. CCP operators should be specially trained for their function(s) and include the operations they are responsible for and be included in the training management program (see 1.01.04). Records of training should be kept and also certificates where relevant. All workers should be trained to understand the principles of HACCP and the plan implemented in the facility. Training should be scheduled on a regular basis and documented. The training should be tailored to the people and their positions within the company. HACCP team member training is scored under 6.01.02. Minor deficiency (7 points) if: • Not all plant workers are trained in HACCP (but all key operators and majority of workers have been trained). • Senior management has not received HACCP training. • Single/isolated instance(s) of omissions or incorrect data in the records. Major deficiency (3 points) if: • One or more CCP operators has not been trained in their specific functions (but has received basic HACCP training). • Numerous instances of omissions or incorrect data in the records. Non-compliance (0 points) if: • One or more CCP operators have not been trained in their specific functions (but have received basic HACCP training). • No formal training session developed for workers. • No records of training being maintained.
6.03.01		Question removed		

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6.03.02	6.03.03	No change in v3.2	The monitoring records should show that testing frequency, parameters and any other details match what is written in the HACCP Plan and CCP SOPs. The records should show actual values or observations, be accurate and legible, be real-time recording and have adequate detail.	Total compliance (15 points): CCP monitoring activities and frequencies are in compliance with what is written in the HACCP Plan and CCP SOPs. Check current logs against the HACCP plan. Auditor should carefully check the monitoring frequencies – allow some slight variations (minutes either way of the target frequency). The critical control limits should exactly match those mentioned on the HACCP plan. Note that if a monitoring test is done more frequently than stated, it is not necessarily a fault (i.e. point loss) if it is “in the spirit” of the plan. The records should show actual values or observations, be accurate and legible, be real-time recording and have adequate detail. Minor deficiency (10 points) if: • Single/isolated instance(s) where information or requirements on the records do not match what is noted in the HACCP plan. • Single/isolated instance(s) of issues with how records are being filled out. Major deficiency (5 points) if: • Numerous instances where information or requirements on the records do not match what is noted in the HACCP plan. • Numerous instances of issues with how records are being filled out. Non-compliance (0 points) if: • Fundamental failure to have information or requirements on the records matching what is noted in the HACCP plan. • Records are consistently being filled out incorrectly. • Single instance where a CCP has been created but monitoring data has not been recorded.
6.03.03	6.03.02	No change in v3.2	No change in v3.2	Minor deficiency (7 points) if: • One instance where the CCP operator(s) are lacking in basic knowledge about HACCP principles. • One instance where the CCP operator(s) are not able to explain correctly, details about the CCPs they are monitoring e.g. what to do if the critical control limits are exceeded. Major deficiency (3 points) if: • More than one instance where the CCP operators are lacking in basic knowledge about HACCP principles. • More than one instance where the CCP operators are not able explain correctly, details about the CCPs they are monitoring e.g. what to do if the critical control limits are exceeded. Non-compliance (0 points) if: • Fundamental failure of the interviewed CCP operator to show basic knowledge about HACCP principle. • Fundamental failure of the interviewed CCP operators to be able to explain correctly, details about the CCPs they are monitoring e.g. what to do if the critical control limits are exceeded.

Q #	New #	v3.2 Question	v3.2 Expectation	v3.2 Interpretation Guideline
6.03.04		No change in v3.2	Records should be legible in order to show who actually performed the CCP monitoring tests. If initials are used, there should be a way to easily determine who the initials refer to.	No change in v3.2
6.03.05	6.03.06	No change in v3.2	No change in v3.2	Total compliance (15 points): Corrective actions should be detailed in writing when a deviation/loss of control of a CCP occurs as per procedure in 6.02.09. The CCP deviations should be noted on a deviation record (or similar form, as noted in the HACCP plan), should detail what has happened, what was done to correct the issue and any preventative actions taken to prevent reoccurrence. Records should indicate what happened to any affected product and also detail how the process was rectified. The corrective action details should match what is described in the HACCP plan.
6.03.06	6.03.05	No change in v3.2	Records should be signed off by a trained, designated person within 36 hours of the original CCP monitoring activity occurring. The sign off should not be done by the same person who carried out the monitoring activities. If any issues are detected, corrective actions should be recorded. Ideally records are reviewed prior to release of product to prevent potential recall and unintended consequences should a deviation be found during record review. Allowance may be made for operations that are not running daily (auditor discretion applies).	Total compliance (10 points): CCP records should be reviewed, dated and signed off by a trained, designated person within 36 hours of the original CCP monitoring activity occurring. Ideally records are reviewed prior to release of product to prevent potential recall and unintended consequences should a deviation be found during record review. Allowance may be made for operations that are not running daily (auditor discretion applies). The sign offs should be done by the quality control supervisor or manager (second signatory). This should be a separate signature to that of the CCP operator. The individual signing off should check the records (e.g. dates, production lines, monitoring results, frequencies, corrective actions, use of correct forms, etc.), since their signature is basically stating that everything is in order relative to the written HACCP plan and associated documents. If discrepancies are found during the record review corrective actions must be taken and documented (6.03.06). Minor deficiency (7 points) if: • Single/isolated instance(s) of CCP records not reviewed, dated and signed off within 36 hours by the quality control supervisor or manager (second signatory). • Single/isolated instance(s) of the CCP records being signed off by the second signatory but there are issues with the records that have not been highlighted. Major deficiency (3 points) if: • Numerous instances of CCP records not reviewed, dated and signed off within 36 hours by the quality control supervisor or manager (second signatory). • Numerous instances of the CCP records being signed off by the second signatory but there are issues with the records that have not been highlighted. Non-compliance (0 points) if: • Fundamental failure for CCP records to be reviewed, dated and signed off. • Widespread errors on the CCP records that are being signed off by the second signatory.